

# Standard Application Form for Agricultural Manure Applicators Please Type or Print

# Section 1 - FARM INFORMATION

DATE	OPERATION NUMBER ND			
NEW OR EXPANDING	OPERATION			
IF EXPANDING: PERMIT NUMBER		DATE ISSUED		
FARMAME				
	COMMUNITY			
LOCATION				
	Section 2 – CONTACT INFOR	MATION		
PERMIT APPLICANT'S NAME				
ADDRESS				
		(CELL/BEEPER)		
,	,	,		
MANURE APPLICATOR'S NAME (if differ	ent)			
,	,			
		(CELL/BEEPER)		
	(rrom_)	(022,321, 2.1)		
MANURE HAULER'S NAME (if different)				
· · · · · · · · · · · · · · · · · · ·				
		(CELL/BEEPER)		
THORE NOWBER (WORK)	(FIONIE)	(0222/3221/21/)		
PLAN PREPARER				
		(CELL/BEEPER)		
THORE NOWBER (WORK)	(1777)	(OLLUBLEI EIV)		
Secti	on 3 – MANURE HANDLING &	TREATMENT		
MANURE HANDLING: DRY or WET				
ARE YOU OBTAINING MANURE FROM	ABROKER? YES or N	0		
ARE YOU OBTAINING MANURE FROM A BROKER? YES or NO  NAME OF BROKER				
ARE YOU CONSTRUCTING A STORAGE OR COMPOSTING FACILITY FOR THE MANURE?				
DO YOU OWN ALL OF THE MANURE UTILIZATION AREAS? YES or NO  TOTAL NUMBER OF ACRES ADDED FOR MANURE UTILIZATION?				
TO TAL NUMBER OF ACRES ADDED FO	K IVIANUKE U I ILIZATIUN?			

For more fields please m		ction 4 – MANURE UTILIZA page and add as additiona		_
SEPARATION DISTANCES:	Tract #→			
DOTABLE MELL	Field #→			
POTABLE WELL	200 ft			
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft			
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*			
DITCHES DOWNSLOPE	50 ft			
RESIDENCE	300 ft**			
			(CELL/BEEPER)	
TABLE #2	,	, ,	,	,
SEPARATION DISTANCES:	Tract #→			
DOTABLE MELL	Field #→			
POTABLE WELL	200 ft			
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft			
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*			
DITCHES DOWNSLOPE	50 ft			
RESIDENCE	300 ft**			
PROPERTY OWNER OF	RECORD			
ADDRESS				
			(CELL/BEEPER)	
,	,	, ,	,	
TABLE #3				
SEPARATION DISTANCES:	Tract #→			
	Field #→			
POTABLE WELL	200 ft			
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft			
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*			
DITCHES DOWNSLOPE	50 ft			
RESIDENCE	300 ft**			
PROPERTY OWNER OF	FRECORD		1 1	
	RK)	(HOME)	(CELL/BEEPER)	

- \* If the method of application is spray application or ground surface application. Reduced to 75 ft for incorporated manure, and 50 ft for injection or incorporation within 24 hours.
- \*\* If method of application is injection or immediate incorporation, then manure may be spread to the property line. All residence setbacks may be reduced by consent of the owner of the residence.
- → IDENTIFY THE PROPERTY OWNER FOR EACH TRACT OF LAND UTILIZED FOR MANURE APPLICATION

Section 5 – PERMIT APPLICATION SUBMITTAL REQUIREMENTS					
SUBMITTAL PACKAGE SHOULD INCLUDE 2 COPIES OF THE FOLLOWING ITEMS:  1. ORIGINAL APPLICATION (and 1 copy of the original)  2. MANURE MANAGEMENT PLAN  a. Animal Manure Management System Description  b. Design Calculations and Construction Details for treatment/storage structure, including exact location and design information.  c. Concentration of Manure Constituents  d. Crop Management Plan (including contracts for each field not owned by the applicant, field owner's name and contact information)  e. Type of Waste Transport/Spreading Equipment (if applicable)  f. Manure Utilization Area Information and Maps  g. Soils Information (maps & descriptions)  h. Location maps (showing treatment/storage structure, and all fields)  i. 100 year floodplain locations (treatment/storage structure may not be located in the 100-year floodplain)  3. ODOR ABATEMENT PLAN  4. VECTOR ABATEMENT PLAN  5. SOIL MONITORING PLAN  6. COPY OF CONTRACT WITH PRODUCER(S) OR BROKER(S) TO OBTAIN MANURE  7. COPY OF CONTRACT WITH LAND OWNER'S OF FIELDS TO RECEIVE MANURE APPLICATION (rented farmland)  8. WRITTEN CONSENT FOR WAIVING OR REDUCING SETBACKS FOR TREATMENT/STORAGE STRUCTURE  9. APPLICATION FEE: See instructions on the back of this page for amount.  10. ANNUAL OPERATING FEE: See instructions for amount (first year's fee must be submitted prior to permitting)					
	Section 6 CERT	FICATION			
I HEREBY CERTIFY THAT ALL OPERATIONS, MAINTENANCE AND ASSOCIATED ACTIVITY PERTAINING TO THIS SITE SHALL BE ACCOMPLISHED PURSUANT TO AND IN KEEPING WITH THE TERMS AND CONDITIONS OF THE APPROVED PLANS. I HAVE READ THIS APPLICATION AND AGREE TO THE REQUIREMENTS AND CONDITIONS THAT ARE CONTAINED WITHIN. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I HEREBY GRANT AUTHORIZATION TO THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL THE RIGHT OF ACCESS TO THE SITE AT ALL REASONABLE HOURS FOR THE PURPOSE OF SAMPLING AND ON SITE INSPECTIONS.					
Printed Name /N	Manure Applicator	Signature/Manure Applicator			
I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE DESIGN IS CONSISTENT WITH THE REQUIREMENTS OF TITLE 48, CHAPTER 1 OF THE 1987 SC CODE OF LAWS, AND PURSUANT REGULATION 61-43 AND APPROPRIATE NRCS STANDARDS.					
Printed Name/P	lan Preparer	Signature/Plan Preparer			

### APPLICATION INSTRUCTIONS - Agricultural Manure Applicator's Permit

### Purpose:

This form must be completed as part of an application package submitted for DHEC approval of proposed agricultural manure application operations. The required items should be checked to ensure that a complete administrative package has been submitted. If a complete administrative package is not submitted, the entire project may be returned.

## Item by Item Instructions:

**Section 1 - Farm Information**. Date: Enter the date of application. Facility Number. The Department will assign this number, leave blank. New or Expanding Operation: If this application is for an existing manure application operation that has previously obtained a agricultural permit from DHEC, then indicate by checking EXPANDING or NEW for new operations. Permit Number. Provide the permit number for the permitted operation and the date on which DHEC issued that permit. Farm Name: Give the name of the proposed agricultural manure application operation. County: Give the county in which the proposed operation is to be located. Community: Give the name of the community in which the proposed operation is to be located. Location: Give directions to the proposed operation from the nearest town or state road.

**Section 2 - Contact Information**. Permit Applicant. Enter the name, address and phone number of the person who legally owns the property on which the proposed agricultural manure application operation is to be located. *Manure Applicator's Name, Address, Phone Number*. Enter the name, address and phone number of the person who will be responsible for the manure application. *Manure Hauler's Name, Address, Phone Number*. Enter the name, address and phone number of the person who will be responsible for transporting the manure. *Plan Preparer*. Enter the name of the plan preparer. *Title/SC Registration Number*. Enter the title and SC registration number (if applicable) of the person responsible for the design of the Animal Facility Management plan. *Address, Phone Number*. Enter the business address and phone number for the plan preparer.

**Section 3 – Manure Handling & Treatment**. Manure Handling: Circle DRY or WET to indicate the type of manure handling for this operation. Manure Broker: Circle YES or NO to indicate whether a manure broker will be used for contract disposal of the manure from this facility and provide the name of the broker to be used (if applicable). Exceptional Quality Compost: Circle YES or NO to indicate whether you are applying for the manure treated at your facility to qualify as exceptional quality compost (must meet product quality standards outlined in Part 300 of R.61-43). Trained Manure Manager: Circle YES or NO to indicate whether the manure applicator has attended the certified manure manager's training and certification class conducted by Clemson Extension Service. Indicate the date on which the certification or training was obtained.

**Section 4 – Manure Utilization Area Information**. This table outlines the required setbacks for manure utilization areas. Enter a tract number and field number for each field; and the actual separation distance for each manure application field in the appropriate spaces. Make copies of this page if you need additional tables for the field information.

### **Agricultural Permit Application Fees**

Facility Type Agricultural Manure Application Operations	DHEC Time	<b>Fee</b> \$165
Agricultural Mariare Application operations		φ ι σ σ

**Section 5 – Permit Application Submittal Requirements.** Please check each item that is being submitted as a part of this application. *All* items under Section 5 should be submitted to DHEC for review. In accordance with the **Environmental Protection Fee Reg. 61-30**, an application fee is required for submitting an Application for agricultural animal facilities. There is a requirement that DHEC meet certain time frames when processing permit applications. The "DHEC Time" is not the total time but rather it is generally the time that DHEC spends working on an application after a complete package is received. "DHEC Time" does not include the time an applicant takes to supply any information that may be requested by DHEC. The fees and time frames are as follows:

**Note:** Make **CHECKS** payable to SC DHEC/Bureau of Finance.

Regulation R61-30 also authorizes DHEC to assess annual environmental operating permit fees for certain permits. All new facilities must submit payment for the first years operating fee before the permit to construct is issued. The operating fee is \$75 per year for agricultural manure application operations.

**Section 6 – Certification.** For this section, please read the certification statements and have the appropriate person(s) sign the certification.

### **DHEC Processing Procedures:**

Two (2) copies of the submittal package are submitted to DHEC. After Permitting, DHEC files the original in the main project file, located in DHEC's central office. DHEC sends a copy of the approved package to the appropriate EQC District Office.